FEC FORM 1

STATEMENT OF **ORGANIZATION**

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14 APR 21 PM 12: 12

			Office Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
Nunn for Senate			
ADDRESS (number and street)	P.O. Box 78936		
(Check if address			
is changed)	Atlanta	<u> </u>	GA , 30357 , ,
	CITY ▲		STATE ▲ ZIP CODE ▲
001414177550 5 4441 400055			JINICE ZII OODER
COMMITTEE'S E-MAIL ADDRES			
(Check if address is changed)	compliance@micheller	nunn.com 	
	Optional Second E-Mail Ad	ldress	
7457451 / 17657	0 / / [7] 4] 4] 4] 4]		
2. DATE 03 31	2014		
3. FEC IDENTIFICATION NU	MBER ▶ CC	00547414	
æ		[]	
4. IS THIS STATEMENT	NEW (N) OR	L AMENDED (A)	
certify that I have examined the	is Statement and to the best	of my knowledge and belief it	is true, correct and complete.
Type or Print Name of Treasurer	James Grien	111	
Signature of Treasurer James	Gries. I ferres of		Date 04 10 2014
		may subject the person signing to	his Statement to the penalties of 2 U.S.C. §437 ITHIN 10 DAYS.
Office Use Only		For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	ECL. EUSIN I